

<b>SCC eFile</b>	<b>2013 ANNUAL REPORT</b> <b>COMMONWEALTH OF VIRGINIA</b> <b>STATE CORPORATION COMMISSION</b>	<b>213516693</b>			
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME:  <b>VALLEY FORGE INSURANCE COMPANY</b></p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:  <b>CT CORPORATION SYSTEM</b>  <b>4701 COX RD STE 301</b>  <b>GLEN ALLEN, VA</b></p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE:  <b>HENRICO COUNTY</b></p> <p>4.) STATE OR COUNTRY OF INCORPORATION:  <b>PA</b></p> </div> <div style="width: 35%;"> <p>DUE DATE: <b>4/30/2013</b></p> <p>SCC ID NO: <b>F0067290</b></p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	
CLASS	AUTHORIZED				
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 333 S WABASH AVE 43RD FLOOR</p> <p style="text-align: center;">CITY/ST/ZIP: CHICAGO, IL 60604</p>					
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS:      All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>					
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: THOMAS F MOTAMED  TITLE: CHRMN/CEO/PRES  ADDRESS: 333 S. WABASH AVE  CITY/ST/ZIP/CO: CHICAGO, IL 60604 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 40%; text-align: center; vertical-align: middle;"> OFFICER      <input checked="" type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: THOMAS F MOTAMED TITLE: CHRMN/CEO/PRES ADDRESS: 333 S. WABASH AVE CITY/ST/ZIP/CO: CHICAGO, IL 60604	<input checked="" type="checkbox"/>	OFFICER <input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STATHY DARCY SVP/DEP GEN COU 333 S WABASH AVE CHICAGO, IL 60604	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LARRY A. HAEFNER EVP/CHIEF ACTUA 333 S WABASH AVE CHICAGO, IL 60604	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	D CRAIG MENSE EVP/CFO 333 S WABASH AVE CHICAGO, IL 60604	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GEORGE R. FAY EVP 333 S WABASH AVE CHICAGO, IL 60604	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LAWRENCE J. BOYSEN DIRECTOR 333 S WABASH AVE CHICAGO, IL 60604	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARK I. HERMAN PRESIDENT 333 S. WABASH AVE. CHICAGO, IL 60604	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ STATHY DARCY SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	STATHY DARCY, SVP/DEP GEN COU PRINTED NAME AND CORPORATE TITLE	4/4/2013 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			